· PART B - FEE(S) TRANSMITTAL

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CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(1) the names of up to 3 registered patent attorneys or agents OR, afternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3.					
	" AND RESIDENCE DATA	A TO BE	PRINTED ON						
PLEASE NOTE: Un	nless an assignee is ident	ified belo		-		-	e is id	entified below, the do	cument has been filed i
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4a. The following fcc(s) I Issue Fee Publication Fee (Advance Order -	b. Payment of Fec(s): (Please first reapply any praviously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. Director is hereby authorized to charge the required foo(s), any deficiency, or credit any overpayment, to Deposit Account Number 504019 (enclose an extra copy of this form).								
a. Applicant clain	stus (from status indicate ns SMALL ENTITY stat	ıs. S ⇔ 37		🗆 b. Applicant is no	long	ger olaiming SMALI	L ENT	ITY status. See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee a interest as shown by the	nd Publication Fee (if req records of the United St	uircd) wil tes Paten	li not be accepte t and Trademar	ed from anyone other th k Office.	en t	no applicant; a regist	ered a	Morney or agent; or the	888 ignes or other party
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